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## BIB DATA SHEET

CONFIRMATION NO. 4102

SERIAL NUMBER	FILING or 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
10/550,707	06/26/2006	623	3734	022037-000150US
<b>RULE</b>				

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**\*\* CONTINUING DATA \*\*\*\*\***  
 This application is a 371 of PCT/US04/08909 03/23/2004 pending EC  
 which claims benefit of 60/458,323 03/26/2003  
 and claims benefit of 60/462,219 04/10/2003  
 and is a CIP of 10/746,452 12/24/2003 pending EC  
 which claims benefit of 60/458,323 03/26/2003  
 and claims benefit of 60/462,219 04/10/2003  
 and said PCT/US04/08909 03/23/2004 pending EC  
 is a CIP of 10/745,778 12/24/2003 pending EC  
 which claims benefit of 60/458,323 03/26/2003  
 and claims benefit of 60/462,219 04/10/2003  
 and said PCT/US04/08909 03/23/2004 pending EC  
 is a CIP of 10/746,455 12/24/2003 pending EC  
 which claims benefit of 60/458,323 03/26/2003  
 and claims benefit of 60/462,219 04/10/2003  
 and said PCT/US04/08909 03/23/2004 pending EC  
 is a CIP of 10/792,684 03/02/2004 ABN

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

**\*\* IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* \*\* SMALL ENTITY \*\***  
 11/11/2006

Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Met after Allowance	<b>STATE OR COUNTRY</b>	<b>SHEETS DRAWINGS</b>	<b>TOTAL CLAIMS</b>	<b>INDEPENDENT CLAIMS</b>
35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		CA	30	35	6
Verified and Acknowledged <u>/ERIN L. COLELLO/</u> Examiner's Signature	<u>Initials</u>				

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 UNITED STATES

**TITLE**  
 Implant delivery technologies

FEES: Authority has been given in Paper	<input type="checkbox"/> All Fees
	<input type="checkbox"/> 1.16 Fees (Filing)